

# EXHIBIT 20

Participant must provide all of the information below **in English**:

1. Participant's contact information, including email address, and that of its counsel, if any:

Participant's Name: Héctor S. Sánchez Alicea  
Participant's Address: RR #11 Buzón 5607  
Participant's Email Address: Bayamón PR. 00956-9715  
Name of Counsel: Departamento de Educación  
Address of Counsel: Ave. Chardón Hato Rey San Juan P.R.  
Email Address of Counsel: \_\_\_\_\_

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number: No. 17 BK 3283-LTS  
Nature of Claim: aumento no otorgado

By: H. S. Sánchez

Signature

Héctor S. Sánchez Alicea

Print Name

Maestro Pensionado

Title (if Participant is not an individual)

20 agosto 2021

Date

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**Instructions for Filing Notice of Participation:** If you are represented by counsel, this Notice must be filed electronically with the Court on the docket using the CM/ECF docket event Notice of Intent to Participate in Discovery for Commonwealth Plan Confirmation, in *In re Commonwealth of Puerto Rico*, Case No. 17 BK 3283-LTS, through the Court's case filing system on or before the applicable deadline. If you are not represented by counsel, you may instead mail this Notice to the Court's Clerk's Office at: United States District Court, Clerk's Office, 150 Ave. Carlos Chardon Ste. 150, San Juan, P.R. 00918-1767.

Hector S. Sanchez  
R.R. #11 Bu. Nuevo  
Buzon 5607  
Bay, P.R. 00956



BAYAMON, PR  
00957  
AUG 23, 21  
AMOUNT

\$6.45  
R2305P149970-13

AUG 1  
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PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
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